### Delbert Hosemann SECRETARY OF STATE

# Political Committee REPORT OF RECEIPTS AND DISBURSEMENTS 2010 Judicial Election

MAY - 7 2010

ELECTIONS DIVISION SECRETARY OF STATE

 Name of Committee
 Committee
 To Elect Jeff Weill

 Address
 P.O. Drawer 12753, Jackson, MS 39236

 Telephone
 601-354-4926
 Fax 601-354-4947

DATESTAMP

Treasurer Walter Murphy

Email wnmurphy2@comcast.net

Check here if above is different from previous report

·	
TYPE OF REPORT	
X May 10, 2010 Periodic Report (January 1, 2009, through April 30, 2010)	Mandatory
June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010)	Mandatory
July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010)	Mandatory
October 10, 2009 Periodic Report (July 1, 2010, through September 30, 2010)	Mandatory
October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010)	Mandatory
November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010)	Runoff Candidates
January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010)  Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligations	Mandatory terminate reporting

### IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (lii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

### REPORTED CONTRIBUTIONS AND DISBURSEMENTS

This Period		Calendar Year-To-Date
\$ 77,133.37	\$	77,133.37
<b>\$</b> 11,115.48	\$	11,115.48
\$ 66,017.89		
	\$ 77,133.37 \$ 11,115.48	\$ 77,133.37 \$ \$ 11,115.48 \$

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Director or Treasure

5-6-20/0

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, mutil-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-576-2819.

2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

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Name of Candidate or Committee \_\_\_

Committee to Elect Jeff Weill

Reporting period 3-4-2010

\_through \_\_

4-30-2010

A. Source: Corporation PAC Andividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 17 / 10	\$ 2,500.00
W.D. Mounger Mailing Address		\$
200 E. Capitol Street, Suite 1601 City, State, Zip Code		\$
Jackson, MS 39201 Name of Employer (Required) self employed		\$
Occupation (Required) self employed	Aggregate year-to-date	\$ 2,500.00
B. Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Mississippi Physicians PAC	4 / 28 / 10	\$ 2,500.00
Mailing Address 404 West Parkway Place		\$
City, State, Zip Code	11	\$
Ridgeland, MS 39157 Name of Employer (Required)		s
Occupation (Required) Physicians	Aggregate year-to-date	\$ 2,500.00
C. Source:   Corporation   PAC   Individual   Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 17 / 10	\$ 1,000.00
James B. Furrh, Jr. Mailing Address		\$
City, State, Zip Code		\$
Jackson, MS 39211 Name of Employer (Required)		\$
self employed Occupation (Required) Oil and gas	Aggregate year-to-date	\$ 1,000.00
D. Source: Corporation PAC Andividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3_/_17/_10	\$ 1,000.00
E.B. Robinson Mailing Address 40 Feathweaks		\$
49 Eastbrooke City, State, Zip Code		s
Name of Employer (Required)		\$
N/A Occupation (Required) Retired	Aggregate year-to-date	\$ 1,000.00

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Name of Candidate or Committee Committee to Elect Jeff Weill Reporting period 3-4-2010 through 4-30-2010

Source: Corporation PAC Andividual Loan  Date (Mo., Day, Year)		Amount of each receipt this period	
Full name	2 , 22, 10		
Randy James	<u>3 / 23/ 10</u>	1,000.00	
Mailing Address	W 2	\$	
217 W. Capitol St., Suite 201 City, State, Zip Code	-'-'-	s	
		•	
Jackson, MS 39201		_	
Name of Employer (Required)	1 1	\$	
Pruet Oil Co.	1.0000000000000000000000000000000000000	_	
Occupation (Required)	Aggregate	\$ 1,000.00	
Oil and gas	year-to-date		
B. Source: Corporation   PAC   Individual   Loan	Date (Mo., Day, Year)	Amount of each receipt this period	
Full name		e	
Pryor Realty, Inc.	<u>3 / 23/ 10</u>	1,000.00	
Mailing Address		\$	
	1_1_1	*	
16 Gleneagles Drive			
City, State, Zip Code	I I	\$	
Jackson, MS 39211			
Name of Employer (Required)		\$	
Occupation (Required)	Aggregate	\$ 1,000.00	
Real Estate	yearto-date	1,000.00	
C. Source: Corporation PAC individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period	
Full name	3 / 23/ 10	\$ 1,000.00	
Leland Speed Mailing Address			
120 20 E 120 0 1 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0	//	\$	
P.O. Box 22728 City, State, Zip Code		\$	
Jackson, MS 39225		•	
Name of Employer (Required)		\$	
East Group Properties Occupation (Required)	Ammonata		
Real estate	Aggregate year-to-date	\$ 1,000.00	
D. Source: Corporation PAC Individual Loan	Date	Amount of each receipt	
NOther (please specify) LLC	(Mo., Day, Year)	this period	
Full name Highland Village, LLC	<u>3 / 25 / 10</u>	\$ 1,000.00	
Malling Address 4500 I-55 North, Suite 281		\$	
City, State, Zip Code	1 1	\$	
Jackson, MS 39211		2.73	
Name of Employer (Required)	_'_'_	\$	
Occupation (Required)	Aggregate	\$	
Commercial Real Estate	year-to-date	1,000.00	

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Reporting period 3-4-2010 through 4-30-2010

A. Source: Corporation PAC Sindividual Loan Date (Mo., Day,		Amount of each receipt this period
□ Other (please specify)	2 / 25 / 10	¢
David Dunbar	_3/25/10	1,000.00
Mailing Address	1 1	\$
127 Cherry Laurel In.		
City, State, Zip Code	6 6	\$
Jackson, MS 39157	-'-'-	
Name of Employer (Required)	1 1	\$
Dunbar Monroe, P.A.	-'-'-	
Occupation (Required)	Aggregate	\$
Attorney	yearto-date	1,000.00
B. Source: □ Corporation □ PAC 🕱 Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	2 .25 .10	\$ 1,000.00
Howard McMillan	3 1 25 1 10	1,000.00
Mailing Address	24 - 24	\$
The state of the s	_/_/_	°
1200 Meadowbrook Rd.		\$
City, State, Zip Code		•
Jackson, MS 39206		\$
Name of Employer (Required)	111	*
Millsaps Occupation (Required)	Aggregate	\$
Education	year-to-date	1,000.00
C. Source: Corporation PAC Kindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 29 / 10	\$ 1,000.00
Rick Calhoon	- Very	\$
Mailing Address		*
4211 Fastover Place City, State, Zip Code		\$
2445th - 1845th - 1855th - 185		
Jackson, MS 39211		\$
Name of Employer (Required)		*
Pruett Oil Occupation (Required)	Aggregate	\$ 4 000 00
Oil and gas	year-to-date	1,000.00
D. Source: Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	2 / 20/40	e 1 000 00
Duane Dewey	3 / 29/10	\$ 1,000.00
Mailing Address	11	\$
4654 Hickory Ridge Rd.		•
City, State, Zlp Code		\$
Jackson, MS 39211		252
Name of Employer (Required)		\$
Trustmark	Aggregate	\$
Occupation (Required) Banking	year-to-date	1,000.00

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Reporting period 3-4-2010 through 4-30-2010

Source: Corporation PAC SIndividual Loan  Other (please specify)  (Mo., Day, Year)		Amount of each receipt this period	
Full name	<u>3 / 31 / 1</u> 0	\$ 1,000.00	
Ben Allen	<u> </u>		
Mailing Address	T E	\$	
2517 Meadowbrook Rd.	''-		
City, State, Zip Code		\$	
Jackson, MS 39211	'		
Name of Employer (Required)	x x	\$	
Downtown Jackson Partners			
Occupation (Required)	Aggregate	\$	
Development	year-to-date	1,000.00	
B. Source:   Corporation  PAC  Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period	
Full name		\$ 1,000,00	
W.P. Bridges, Jr.	<u>3 / 31 / 1</u> 0	1,000.00	
Mailing Address		\$	
	//		
P.O. Box 16978 City, State, Zip Code		•	
	1 1	\$	
Jackson, MS 39236	5-25-3-3		
Name of Employer (Required)	1 1	\$	
N/A			
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00	
Retired  C. Source:  Corporation  PAC  Mindividual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period	
Full name	3 / 31 / 10	\$ 1,000.00	
Wade Creekmore, Jr.	<u> </u>		
Mailing Address	1 1	\$	
1018 Highland Colony Parkway			
City, State, Zip Code	$\tilde{I} = \tilde{I}$	\$	
Ridgeland, MS 39157			
Name of Employer (Required)	T I	\$	
Telaplex, Inc.			
Occupation (Required)	Aggregate	\$	
Communications	year-to-date	1,000.00	
D. Source:  Corporation  PAC  Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period	
Full name	0 / 04 / 40	. 4 000 00	
Larry Favreau Mailing Address	3_/_31/_10	\$ 1,000.00	
4741 Cheryl Drive		\$	
City, State, Zip Code			
Jackson, MS 39211		\$	
Name of Employer (Required)	20 00		
Southern Farm Bureau Life Insurance	//	\$	
Occupation (Required) CFO	Aggregate year-to-date	1,000.00	

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Reporting period 3-4-2010 through 4-30-2010

A. Source:   Corporation  PAC Mindividual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31 / 10	\$ 1,000.00
Ross Hooper	3, 31, 10	
Mailing Address	1 1	\$
5125 Old Canton Rd. #209		
City, State, Zip Code	A: Y:	\$
Jackson, MS 39211		
Name of Employer (Required)	F 7	\$
Secretary of State	-'-'-	
Occupation (Required)	Aggregate	\$
Services	year-to-date	1,000.00
B. Source: □ Corporation □ PAC X Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	2 : 21 : 12	\$ 1,000,00
Carson Hughes	3 / 31 / 10	1,000.00
Mailing Address	761 301	\$
		. 70
1018 Highland Colony Parkway City, State, Zip Code		•
	1 1	\$
Ridgeland, MS 39157		
Name of Employer (Required)	1 1	\$
Telapex		•
Occupation (Required)	Aggregate year-to-date	1,000.00
Communication	year-to-date	
C. Source:   Corporation   PAC   Individual   Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31 / 10	\$ 1,000.00
Lee Lampton	<u></u>	
Mailing Address	1 1	\$
P.O. Box 2401		
City, State, Zip Code	1 1	\$
Jackson, MS 39225		
Name of Employer (Required)	1 1	\$
Ergon	''-	
Occupation (Required)	Aggregate	\$ 4 000 00
Petroleum gases	year-to-date	1,000.00
D. Source:   Corporation PAC XIndividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	2 / 24 / 40	e 1 000 00
Hibbett Neel	3 / 31 / 10	\$ 1,000.00
Mailing Address	1 1	\$
P.O. Box 22625		
City, State, Zip Code		\$
Jackson, MS 39225		///
Name of Employer (Required)		\$
Neel-Shaffer	Aggregate	\$
Occupation (Required) Engineer	year-to-date	1,000.00

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Name of Candidate or Committee <u>Committee to Elect Jeff Weill</u> 3-4-2010 through 4-30-2010

Reporting period\_

A. Source: Corporation PAC Mindividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
☐ Other (please specify)	0 : 01 : 10	•
Roy Ward	<u>3</u> / <u>31</u> / <u>10</u>	1,000.00
Mailing Address	986 2	\$
4230 Quail Rum Rd.		ig.
City, State, Zip Code		\$
400 100 100 100 100 100 100 100 100 100	111	
Jackson, MS 39211 Name of Employer (Required)		
FOR STANFORM THE PRODUCT OF THE PRODUCT OF THE STANFORM OF THE		\$
N/A Occupation (Required)	Acceptants	
Retired	Aggregate year-to-date	1,000.00
B. Source:   Corporation  PAC Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		•
	4 / 7 / <u>10</u>	1,000.00
David Russell Mailing Address		\$
The state of the s	1 1	•
P.O. Box 4795		
City, State, Zip Code	1 1	\$
Jackson, MS 39296		
Name of Employer (Required)	1 1	\$
Information requested		
Occupation (Required)	Aggregate	\$
Information requested	year-to-date	1,000.00
C. Source:   Corporation   PAC X Individual   Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3_/31/_10	\$ 650.00
John Price		
Mailing Address	1 1	\$
394 Gluckstadt Rd.		
City, State, Zip Code	1 1	\$
Madison, MS 39110		
Name of Employer (Required)	I = I	\$
Wise Carter		
Occupation (Required)	Aggregate	\$ (50,00
Attorney C DAG M telluldual C Lean	year-to-date	650.00
D. Source: □ Corporation □ PAC ☒ Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	0 147 140	<b>A</b> 500 00
Maston L. Ballew, III	3 / 17 / 10	\$ 500.00
Mailing Address	190 290	•
P.O. Box 12247	'_'	\$
City, State, Zip Code	7. 7	\$
Jackson, MS 39236		•
Name of Employer (Required)	j i	\$
Security Ballew Inc.		
Occupation (Required)	Aggregate	\$ 500.00
Financial Services	year-to-date	300.00

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Name of Candidate or Committee Committee to Elect Jeff Weill

Reporting period 3-4-2010 through 4-30-2010

A. Source: Corporation PAC Andividual Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)	3 /23 /10	\$ 500.00
Walter Murphy Mailing Address	1 1	\$
29 Avery Circle City, State, Zip Code		\$
Jackson, MS 39211	'	W
Name of Employer (Required)	11_	\$
Tann, Brown & Russ Co., PLLC Decupation (Required)	Aggregate year-to-date	\$ 500.00
CPA  B. Source:  Corporation  PAC  Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 25/10	\$ 500.00
Richard Hickson Mailing Address	1 1	\$
3973 Dogwood Drive City, State, Zip Code		\$
Jackson, MS 39211 Name of Employer (Required)		\$
Trustmark Occupation (Required) Banking	Aggregate year-to-date	\$ 500.00
C. Source: Corporation PAC (X) Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each recelpt this period
Full name	4 1 7 1 10	\$ 500.00
Mike Ulmer Mailing Address	_1_1_	\$
P.O. Box 650 City, State, Zip Code		\$
Jackson, MS 39205 Name of Employer (Required) Watkins & Eager		\$
Occupation (Required)	Aggregate year-to-date	\$ 500.00
Attorney  D. Source: Corporation PAC M Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each recelpt this period
Full name	4 / 13/ 10	\$ 500.00
Haley Fisackerly Mailing Address	1 1	s
4157 Crane Blvd. City, State, Zip Code		\$
Jackson, MS 39216 Name of Employer (Required)		\$
Entergy Occupation (Required)	Aggregate	8
Utilities	year-to-date	500.00

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Name of Candidate or Committee  $\_$  Committee to Elect Jeff  $\underline{\text{Wei}}11$ 

Reporting period 3-4-2010 through 4-30-2010

A. Source: □ Corporation □ PAC ∯Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	4/13/10	\$ 500.00
Robert Grenfell		
Mailing Address	I I	\$
313 Northbay Drive		
City, State, Zip Code	1 1	\$
Madison, MS 39110	-'-'-	
Name of Employer (Required)	, ,	\$
Information requested		
Occupation (Required) Information requested	Aggregate year-to-date	500.00
B. Source: Corporation PAC Individual Loan  (X Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	1 112 110	\$ 500.00
Stanford Hall and Associates, PLLC	4 / 13 / 10	500.00
Mailing Address	nat toat	\$
405 Tombigbee Street		137/
City, State, Zip Code		\$
	11	*
Jackson, MS 39201 Name of Employer (Required)	1 1	\$
Occupation (Populated)		
Occupation (Required) Attorneys	Aggregate year-to-date	\$ 500.00
C. Source: Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name John Barton II	3_/17_/10	\$ 250.00
Malling Address		\$
1828 Devine Street	'	
City, State, Zip Code	74° 1945	\$
Jackson, MS 39202	-/-/-	
Name of Employer (Denuland)	(A) (A)	\$
arkway Properties		.597.
Occupation (Required)	Aggregate	\$ 250.00
Real Estate	year-to-date	250.00
D. Source:  Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 17 / 10	\$ 250.00
Dudley Wooley Mailing Address		, 223.23
4260 Eastridge Dr.	''	\$
City, State, Zip Code	1 1	\$
Jackson, MS 39211		10TX
Name of Employer (Required)	11	\$
Ross & Verger Occupation (Required)	Aggregate	\$
www.purion (Nodanou)	Aggregate	250.00

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Reporting period 3-4-2010 through 4-30-2010

A. Source: □ Corporation □ PAC 🔏 Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3/17/10	\$ 250.00
Wirt A. Yerger, Jr.	,	
Mailing Address	1 1	\$
129 Woodland Circle		
City, State, Zip Code	II	\$
Jackson, MS 39216		\$
Name of Employer (Required)		•
N/A Occupation (Required)	Aggregate	\$ 250.00
Retired	year-to-date	250.00
B. Source:   Corporation   PAC X Individual   Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	0.147.140	\$ 050.00
Mark Blackburn	3/17/10	250.00
Mailing Address		\$
2255 N. Cheryl Drive		
City, State, Zip Code		\$
Jackson, MS 39211	-/-/-	
Name of Employer (Required)	1 1	\$
N/A		
Occupation (Required)	Aggregate year-to-date	\$ 250.00
Retired	year-to-date	
C. Source: Corporation PAC Andividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 23 / 10	\$ 250.00
John Corlew	3 / 23 / 10	250.00
Mailing Address	7 7	\$
2124 Eastover Drive		
City, State, Zip Code	1 1	\$
Jackson, MS 39211		
Name of Employer (Required)		\$
self employed	Aggregate	\$
Occupation (Required)	year-to-date	250.00
Attorney  D. Source: Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	2 102 1 40	
Phil Fisher	<u>3 / 23 / 10</u>	\$ 250.00
Mailing Address	7 7	\$
1012 Post Rd.		.**
City, State, Zip Code	111	s
Clinton, MS 39056		A
Name of Employer (Required)		\$
Hinds County Occupation (Required)	Aggregate	\$ 250.00
Supervisor	year-to-date	250.00

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Reporting period 3-4-2010 through 4-30-2010

A. Source:   Corporation  PAC   Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>3123110</u>	\$ 250.00
Jack Geary Mailing Address		\$
116 Green Drive City, State, Zip Code Jackson, MS 39211		\$
Name of Employer (Required)		\$
N/A Occupation (Required) Retired	Aggregate year-to-date	\$ 250.00
B. Source:   Corporation  PAC Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
James A. Holland	3 /23 /10	\$ 250.00
Mailing Address 4124 Oak Ridge Drive		\$
City, State, Zip Code  Jackson, MS 39215		\$
Name of Employer (Required) Page Kruger & Holland		\$
Occupation (Required) Attorney	Aggregate year-to-date	\$ 250.00
C. Source: Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Charles G. Johnson	3 /23 /10	\$ 250.00
Mailing Address		\$
P.O. Box 13082 City, State, Zip Code		\$
Name of Employer (Required)		\$
Name of Employer (Required) McGowan Working Partners Occupation (Required)	// Aggregate year-to-date	\$ 250.00
Name of Employer (Required) McGowan Working Partners Occupation (Required) Geologist		S
Name of Employer (Required)  McGowan Working Partners Occupation (Required)  Geologist  D. Source: Corporation PAC Andividual Loan  Other (please specify)	year-to-date Date	\$ 250.00 Amount of each
Name of Employer (Required)  McGowan Working Partners Occupation (Required)  Geologist D. Source: Corporation PAC Andividual Loan  Other (please specify)  Full name Sam Lane Mailing Address	year-to-date Date (Mo., Day, Year)	\$ 250.00 Amount of each receipt this period
Name of Employer (Required)  McGowan Working Partners Occupation (Required)  Geologist D. Source: Corporation PAC Andividual Loan  Other (please specify)  Full name Sam Lane Mailing Address 2 Rivers Creek Drive City, State, Zip Code	year-to-date  Date (Mo., Day, Year)  3 /23 /10	\$ 250.00  Amount of each receipt this period  \$ 250.00
Other (please specify)	year-to-date  Date (Mo., Day, Year)  3 /23 /10	\$ 250.00  Amount of each receipt this period  \$ 250.00

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Reporting period 3-4-2010 through 4-30-2010

Source: Corporation PAC XIndividual Loan Date Other (please specify) (Mo., Day, Year)		Amount of each receipt this period	
Full name	3 / 23 / 10	\$ 250.00	
Steven Rogers Mailing Address	1 1	\$	
2659 Lake Circle Drive City, State, Zip Code		\$	
Jackson, MS 39211 Name of Employer (Required)		\$	
Parkway Properties Occupation (Required)	Aggregate year-to-date	\$ 250.00	
Real estate  B. Source:  Corporation  PAC  Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each recelpt this period	
Full name	3 / 23 / 10	\$ 250.00	
Knox Ross Mailing Address P.O. Box 369		\$	
City, State, Zip Code		\$	
Pelahatchie, MS 39145 Name of Employer (Required) self employed		\$	
Occupation (Required)	Aggregate year-to-date	\$ 250.00	
C. Source:   C. So	Date (Mo., Day, Year)	Amount of each recelpt this period	
Full name	3 / 23 / 10	\$ 250.00	
Frnie Strahan Malling Address		\$	
1648 Pine Ridge Pl. City, State, Zip Code Jackson, MS 39211		\$	
Name of Employer (Required)		\$	
Occupation (Required) Retired	Aggregate year-to-date	\$ 250.00	
D. Source:   Corporation   PAC   Individual   Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period	
Full name	3 / 25 / 10	\$ 250.00	
Joe Burns Malling Address 2348 Twin Lakes Circle		\$	
City, State, Zip Code		s	
Jackson, MS 39211 Name of Employer (Required)		\$	
Ridgeland Dental Occupation (Required) Dentist	Aggregate year-to-date	\$ 250.00	

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1 4454				

Reporting period 3-4-2010 through 4-30-2010

Source: Corporation PAC Andividual Loan  Date (Mo., Day, Year)		Amount of each receipt this period	
Full name	3 / 25 / 10	\$ 250.00	
Robert Harris	3 1 22 1 22		
Mailing Address	1 1	\$	
190 Kirkwood Place			
City, State, Zip Code	Y Y	\$	
Jackson, MS 39211			
Name of Employer (Required)	1 1	\$	
Physician	'		
Occupation (Required)	Aggregate	\$ 250.00	
Doctor	year-to-date	250.00	
B. Source:   Corporation  PAC  Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each recelpt this period	
Full name	5 1 05 1 40	\$ 050.00	
	3 / 25 / 10	250.00	
Brooks Mosley Mailing Address		\$	
		003	
5405 Hialeah Drive		\$	
City, State, Zip Code			
Jackson, MS 39211			
Name of Employer (Required)		\$	
Security Ballew, Inc.	Aggregate	\$ 050.00	
Occupation (Required) Financial Services	year-to-date	250.00	
C. Source:   Corporation   PAC   Individual   Loan	Date (Mo., Day, Year)	Amount of each receipt this period	
Full name	<u>31 251 10</u>	\$ 250.00	
Julius Ridgeway, Sr. Mailing Address		\$	
		*	
P.O. Box 16667		S	
City, State, Zip Code		*	
Jackson, MS 39236			
Name of Employer (Required)		\$	
self employed	Aggregate	\$	
Occupation (Required)	year-to-date	250.00	
Oil and gas  D. Source: Corporation   PAC  Individual   Loan	Date (Mo., Day, Year)	Amount of each receipt	
Other (please specify)	TWO CONTRACTORS AND SECURITY	this period	
Full name	<u>3 / 25/ 10</u>	\$ 250.00	
Flo Stover			
Mailing Address	111	\$	
6 Waterstone Place		76	
City, State, Zip Code		\$	
Jackson, MS 39211 Name of Employer (Required)		1007	
	_/_/_	\$	
self employed Occupation (Required)	Aggregate	\$	
self employed	year-to-date	250.00	

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Reporting period\_\_\_\_

# 3-4-2010 through 4-30-2010 ITEMIZED RECEIPTS

A. Source:   Corporation  PAC Mindividual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 25 / 10	\$ 250.00
Denny Terry Malling Address	1 1	\$
P.O. Box 1557 City, State, Zip Code		\$
Ridgeland, MS 39158 Name of Employer (Required)		\$
Trane Co. Occupation (Required)	Aggregate	\$ 250.00
A/C and Heating  B. Source: Corporation PAC Mindividual Loan  Other (please specify)	year-to-date  Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 25 / 10	\$ 250.00
Richard Williams, Jr. Malling Address		\$
P.O. Box 9147 City, State, Zip Code		\$
Jackson, MS 39286 Name of Employer (Required)		\$
Upshaw Williams Biggers & Beckham, LLP Occupation (Required) Attorney	Aggregate year-to-date	\$ 250.00
C. Source: Corporation PAC KIndividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 29/ 10	\$ 250.00
John Crawford Mailing Address		\$
2434 Culleywood Rd. City, State, Zip Code		\$
Jackson, MS 39211 Name of Employer (Required) Butler Snow		\$
Occupation (Required)	Aggregate year-to-date	\$ 250.00
D. Source: Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3/29/10	<b>\$</b> 250.00
William Crim Mailing Address	11	\$
4088 Eastwood Place City, State, Zip Code	1 1	\$
Tackson MS 39211 Name of Employer (Required)		\$
N/A Occupation (Required)	Aggregate	\$
Retired	year-to-date	250.00

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Reporting period 3-4-2010 through 4-30-2010

A. Source: □ Corporation □ PAC Nndividual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 /29 /10	\$ 250.00
Stuart M. Irby Mailing Address	0,27,20	
	1_1_1	\$
3940 Stuart Place		
City, State, Zip Code	1_1_1	\$
Jackson, MS 39211 Name of Employer (Required)		
\$10.50 (\$1.50 \$1.5	//	\$
Self employed Occupation (Required)	Aggregate year-to-date	\$ 250.00
Investor  B. Source: □ Corporation □ PAC 🏖 Individual □ Loan  □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Camille Jefcoat	3 /29 /10	\$ 250.00
Mailing Address		\$
5125 Old Canton Rd. #219 City, State, Zip Code	1 1	\$
Jackson, MS 39211		
Name of Employer (Required)	1 1	\$
Anesthesia Consultants Occupation (Regulred)		
Anesthesiologist	Aggregate year-to-date	\$ 250.00
C. Source: Corporation PAC individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 /29 /10	\$ 250.00
Patrick Moore Malling Address	1 1	\$
4242 Chateau Court		
City, State, Zip Code  Jackson, MS 39211		\$
Name of Employer (Required)		\$
Spooner Companies Occupation (Required)	Aggregate	\$
Oil and gas	year-to-date	250.00
D. Source:  Corporation  PAC Kindividual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 29 / 10	\$ 250.00
Warren Speed Mailing Address	2 129 1 10	
2331 Pebble Lane City, State, Zip Code	-'-'-	\$
		\$
Jackson, MS 39211 Name of Employer (Required)	1 7 7	\$
Parkway Properties		
	Aggregate	\$ 250.00

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Reporting period 3-4-2010

\_\_through \_\_\_\_4-30-2010

A. Source:   Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3/31/10	\$ 250.00
Hunter Arnold Mailing Address		\$
222 Chippewa Circle City, State, Zip Code		\$
Jackson, MS 39211 Name of Employer (Required)	11	\$
Wagonner Engineering Occupation (Required)	Aggregate year-to-date	\$ 250.00
Engineering Consultant  3. Source: Xi Corporation   PAC   Individual   Loan     Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31/ 10	\$ 250.00
Wilkins, Stephens & Tipton, P.A. Mailing Address P.O. Box 13429		\$
City, State, Zip Code		\$
Jackson, MS 39236 Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 250.00
Attorneys  C. Source: Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31/ 10	\$ 250.00
Gene Barnett Mailing Address	1_1_1_	\$
4708 Cainita Place City, State, Zip Code		s
Jackson, MS 39211 Name of Employer (Required) MS Sports Medicine & Orthopedic Center		\$
Occupation (Required) Physician	Aggregate year-to-date	\$ 250.00
D. Source: Corporation PAC X Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Jack Crawford	3/31/10	\$ 250.00
Mailing Address		\$
1962 Douglas Drive City, State, Zip Code Jackson, MS 39211		\$
Name of Employer (Required)		\$
Butler Snow Occupation (Required) Attorney	Aggregate year-to-date	\$ 250.00

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Reporting period 3-4-2010 through 4-30-2010

A. Source: ☐ Corporation ☐ PAC ☐ Mindividual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	2 / 31 / 10	\$ 250.00
J. Kane Ditto	<u>3</u> / <u>31</u> / <u>10</u>	250.00
Mailing Address	7 7	\$
3972 Stuart Place	-'-'-	
City, State, Zip Code	7 7	\$
Jackson, MS 39225		
Name of Employer (Required)	2 2	\$
State Street Group, LLC	-/-/-	
Occupation (Required)	Aggregate	\$
Real estate	year-to-date	250.00
B. Source:   Corporation  PAC   Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		\$ 050.00
Ligon Duncan	3_/_31/_10	250.00
Mailing Address		\$
2215 Heritage Hill Drive		7
City, State, Zip Code		s
	111	•
Jackson, MS 39211		
Name of Employer (Required)	111	\$
First Presbyterian Church Occupation (Required)	Aggregate	\$
Minister	year-to-date	250.00
C. Source:   Corporation   PAC   Individual   Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31/ 10	\$ 250.00
Stephen Folds Mailing Address		S
P.O. Box 16691		
City, State, Zip Code		\$
Jackson, MS 39236		
Name of Employer (Required)		\$
Baker Donelson		
Occupation (Required)	Aggregate	\$
Attorney	year-to-date	250.00
D. Source:  Corporation PAC Nindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	0 104 1 40	£ 250.00
Richard Edmondson Mailing Address	3 / 31 / 10	\$ 250.00
145 Magna Carta Pl.	-/-/-	\$
City, State, Zip Code  Jackson, MS 39211		\$
Name of Employer (Required)	20 20	
Robinson, Biggs, Ingram, Solop & Farris		\$
Occupation (Required) Attorney	Aggregate year-to-date	\$ 250,00

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Reporting period 3-4-2010 through 4-30-2010

A. Source:   Corporation  PAC Nadividual Loan	Date (Mo., Day, Year)	Amount of each receipt	
□ Other (please specify)	NOW NEED AND SHAP	this period	
Full name	3_/_31/_10	\$ 250.00	
John England Mailing Address	7. 0	\$	
1 T	1_1_1_	*	
2034 Petit Bois		-	
City, State, Zip Code	71	\$	
Jackson, MS 39211			
Name of Employer (Required)	1 7	\$	
Butler Snow			
Occupation (Required)	Aggregate	\$	
Attorney	year-to-date	250.00	
B. Source:   Corporation  PAC   Notice   Corporation   Corporation   PAC   Notice   Corporation   PAC   Notice   Corporation   PAC   Notice   PAC   PAC   Notice   PAC   PA	Date (Mo., Day, Year)	Amount of each receipt this period	
full name		\$ 050.00	
Philip Gaines	3 / 31/ 10	250.00	
Mailing Address		\$	
2353 Twin Lakes Circle			
City, State, Zip Code	1 1	\$	
Jackson, MS 39211			
Name of Employer (Required)	1 1	\$	
Currie Johnson Griffin Gaines & Myers, P.A.	-:-:-		
Occupation (Required)	Aggregate	\$ 050.00	
Attorney	year-to-date	250.00	
C. Source: Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period	
Full name	0 1 241 40	\$ 250.00	
Donnie Lambert	3_/_31/_10	250.00	
Mailing Address		\$	
P.O. Box 5098	' ' '		
City, State, Zip Code	7 2 5	\$	
Brandon, MS 39047	''-	1.5	
Name of Employer (Required)		\$	
Donnie W. Lambert Oil & Gas	''-	Me.	
Occupation (Required)	Aggregate	\$	
Oil and gas	year-to-date	250.00	
D. Source: Corporation Description Descrip	Date (Mo., Day, Year)	Amount of each receipt this period	
Full name			
	3_/_31/_10	\$ 250.00	
John Marchetti Mailing Address		\$	
2204 Culleywood Rd.		13/7	
City, State, Zip Code	111	\$	
Jackson MS 39211 Name of Employer (Required)		0.00	
Marchetti, Robertson & Brickell Ins. & Bonding		\$	
Occupation (Required)	Aggregate	\$	
Insurance	year-to-date	250.00	

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Reporting period 3-4-2010 through 4-30-2010

A. Source:   Corporation  PAC X Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31/ 10	\$ 250.00
Armin Moeller, Jr. Mailing Address	1 1	\$
346 St. Andrews Drive		
City, State, Zip Code	ff	\$
Jackson, MS 39211		
Name of Employer (Required)		\$
Bach & Bingham Decupation (Required)	Aggregate year-to-date	\$ 250.00
Attorney  B. Source: Corporation PAC S Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31 / 10	\$ 250.00
Brenda Newhouse	3 131 1	230.00
Mailing Address	11	\$
13 Gleneagles Drive City, State, Zip Code	11	\$
Jackson, MS 39211 Name of Employer (Required) N/A		\$
Occupation (Required) Retired	Aggregate year-to-date	\$ 250.00
C. Source: Corporation PAC X Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31 / 10	\$ 250.00
Scott Newton Mailing Address		\$
206 Belleweather Pass City, State, Zip Code Ridgeland, MS 39157		\$
Name of Employer (Required)		\$
Baker Donelson Occupation (Required)	Aggregate year-to-date	\$ 250.00
Attorney  D. Source: Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31/ 10	\$ 250.00
Jeffrey Reynolds Mailing Address		\$
P.O. Box 24597 City, State, Zip Code		\$
Jackson, MS 39225 Name of Employer (Required)		\$
Jeffrey Reynolds, P.A.		
Occupation (Required) Attornev	Aggregate year-to-date	\$ 250.00

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Name of Candidate or Committee  $\underline{\hspace{0.1cm}}$  Committee to  $\underline{\hspace{0.1cm}}$  Elect  $\underline{\hspace{0.1cm}}$  Jeff  $\underline{\hspace{0.1cm}}$  Weill

Reporting period 3-4-2010 through 4-30-2010

A. Source:   Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31/ 10	\$ 250.00
Victor Smith Mailing Address	20 32	\$
P.O. Box 6177	'	2
City, State, Zip Code	T E	\$
Jackson, MS 39288 Name of Employer (Required)		\$
Victor P. Smith Co.		
Occupation (Required)	Aggregate year-to-date	\$ 250.00
B. Source: □ Corporation □ PAC 🛣 Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3/31/10	\$ 250.00
Sam Taylor Mailing Address	-3-131-1-10	250.00
2239 F. Manor Drive		\$
City, State, Zip Code		\$
Jackson, MS 39211 Name of Employer (Required)		\$
Taylor Capital Mgmt.	'	EX.
Occupation (Required) Investment advisor	Aggregate year-to-date	\$ 250.00
C. Source: □ Corporation □ PAC □ Individual □ Loan  X Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3_/31_/_10	\$ 250.00
Mohave Resources, LLC Mailing Address		\$
P.O. Box 6203	'	90
City, State, Zip Code Tyler, TX 75711		\$
Name of Employer (Required)	_'_'_	\$
Occupation (Required) Oil and Gas	Aggregate year-to-date	\$ 250.00
D. Source: □ Corporation □ PAC 🛣 Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31 / 10	\$ 250.00
Joel Travelstead Mailing Address	, ,	\$
170 Montbrook Drive City, State, Zip Code	'-'-'-	100
Jackson, MS 39211 Name of Employer (Required)		\$
Southern Investment Financing		\$
Occupation (Required) Lending	Aggregate year-to-date	\$ 250.00

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Reporting period 3-4-2010 through 4-30-2010

A Source: Corporation PAC & Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	3 / 31/ 10	\$ 250.00
Jeffrey Wagner Mailing Address	1 1	\$
1702 N. State Street City, State, Zip Code		\$
Jackson, MS 39202 Name of Employer (Required)		\$
Baker Donelson Occupation (Required)	Aggregate vear-to-date	\$ 250.00
B. Source: Corporation PAC Mindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Harry Walker	_3_/_31/_10	\$ 250.00
Mailing Address		\$
148 St. Andrews Drive City, State, Zip Code Jackson, MS 39211		\$
Name of Employer (Required)	_1_1_	\$
Trustmark Occupation (Required) Banking	Aggregate year-to-date	\$ 250.00
C. Source: Corporation PAC Nindividual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	4_/7_/10	\$ 250,00
Wesley Goings Mailing Address		\$
101 Kirkwood Ct. City, State, Zip Code Jackson, MS 39211		\$
Name of Employer (Required) Telapex. Inc.		\$
Occupation (Required) Telecom Management	Aggregate year-to-date	\$ 250.00
D. Source:  Corporation  PAC  Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	4 17 110	\$ 250.00
James Jones Mailing Address	11	\$
3 Gleneagles Drive City, State, Zip Code	1 1	s
Jackson, MS 39211 Name of Employer (Required)		s
Information requested Occupation (Required) Information requested	Aggregate year-to-date	\$ 250.00

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Reporting period 3-4-2010 through 4-30-2010

A. Source:   Corporation  PAC  Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	4 1 7 1 10	\$ 250.00
Kelley Williams	<u></u>	
Mailing Address	1 1	\$
2030 Eastover Drive		•
City, State, Zip Code	1 1	\$
Jackson, MS 39211		
Name of Employer (Required)		\$
N/A Occupation (Required)	Aggregate	e
Retired	year-to-date	\$ 250.00
B. Source:  Corporation PAC Individual Loan  KOther (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	/ . 12 . 10	\$ 250.00
Adcock & Morrison, PLLC	<u>4 / 13 / 10</u>	250.00
Mailing Address	2 Q	\$
P.O. Box 3308	-/-/-	1877
City, State, Zip Code	Th	\$
Ridgeland, MS 39158		
Name of Employer (Required)	2 /4	s
The state of the s		
Occupation (Required)	Aggregate	\$ 250.00
Attorneys	year-to-date	
C. Source:   Corporation   PAC   Individual   Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	4 / 13 / 10	\$ 250.00
Cynthia Speetjens	<u> </u>	
Mailing Address	1 1	\$
2088 Main Street, Suite A		
City, State, Zip Code	1 1	\$
Madison, MS 39110		
Name of Employer (Required)		\$
self employed Occupation (Required)	Aggregate	\$
Attorney	year-to-date	250.00
D. Source: Corporation PAC M Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	/, / 12/ 10	\$ 250.00
Tim Threadgill	4/13/10	4 230:00
Mailing Address		\$
4205 N. Honeysuckle Ln.		76.0
City, State, Zip Code	111	\$
Jackson MS 39211 Name of Employer (Required)		
11 17 21 17 22		\$
Put I er Snow Occupation (Required)	Aggregate	\$ 050.00
Attorney	year-to-date	250.00

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Reporting period <u>3-4-2010</u> through <u>4-30-2010</u>

A. Source: □ Corporation □ PAC ⊠Individual □ Loan □ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	4/20/10	\$ 250.00
Frank Perkins Mailing Address	1 1	\$
941 Luckney Rd. City, State, Zip Code		\$
Brandon, MS 39047		
Name of Employer (Required) Information requested	-/-/-	\$
Occupation (Required) Information requested	Aggregate year-to-date	\$ 250.00
B. Source:   Corporation  PAC  Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
F.M. Bush	4 / 26 / 10	\$ 250.00
P.O. Box 23066		\$
Jackson, MS 39225		\$
Name of Employer (Required) Phelps Dumbar II.P	_1_1_	\$
Occupation (Required) Attorney	Aggregate vear-to-date	\$ 250.00
C. Source: Corporation PAC M (ndlvldua! Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	4 / 26 / 10	\$ 250.00
William Mounger, II Mailing Address 4781 F. Massena Drive		\$
City, State, Zip Code  Jackson, MS 39211		\$
Name of Employer (Required) Continuum, LLC		\$
Occupation (Required) Business manager	Aggregate year-to-date	\$ 250.00
D. Source:   Corporation  PAC  individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Joe Blackston	_4/28/10	\$ 201.00
Mailing Address		\$
1900 Petit Pois North City, State, Zip Code	1 1	\$
Jackson, MS 39211 Jame of Employer (Required)	<u> </u>	1000 1000
United Healthcare Occupation (Required)	Aggregate	\$
Physician	year-to-date	201.00

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Reporting period 3-4-2010 through 4-30-2010

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Jeff Weill	3/9/10	\$ 21,594.87
Mailing Address		\$
1956 Douglas Drive	l-'-'-	AT .
City, State, Zip Code		s
Jackson, MS 39211		*
Name of Employer (Required)		\$
self employed	I-'-'-	4
Occupation (Required) Attorney	Aggregate year-to-date	\$ 21,594.87
B. Source:   Corporation  PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	1 1	\$
Mailing Address	1 1	\$
City, State, Zip Code	1 1	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$
C. Source:   Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		\$
Mailing Address		\$
City, State, Zip Code		s
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$
D. Source:   Corporation  PAC  Individual  Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		\$
Mailing Address		\$
City, State, Zip Code	_1_1_	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$

Reporting period \_\_\_\_

3-4-2010

through 4-30-2010

## ITEMIZED DISBURSEMEN

A. Full name	1 84 5	ELECTIONS DIVISION ECHE LARY OF STATE
U.S. Postal Service	(Mo., Day, Year)	disbursement this period
Mailing Address		c
401 South Street	3 / 17 / 10	352.00
City, State, Zip Code	/ / F / 40	s
Jackson, MS 39201	4/5/10	1,320.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	1,672.00
Alpha Printing, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	2 /22 / 40	\$ (42.20
P.O. Box 7106	3_/23_/_10	613.38
City, State, Zip Code  Jackson, MS 39282-7106	4 /15 / 10	\$ 1,073.41
Purpose of Disbursement (Optional)	Aggregate Year-to-date	<b>\$</b> 1,686.79
C. Full name The Republic Group	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 210 E. Capitol, Suite 1900	3 /23 /10	\$ 2,206.18
City, State, Zip Code	4 4 16 410	e
Jackson, MS 39201	4/16/10	3 2,225.32
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 4,431.50
D. Full name The Mississippi Bar	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P.O. Box 2168	4_/15_/10	s 383.40
City, State, Zip Code	1 1 1 1	
Jackson, MS 39225-2168	//	S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	s 383.40
E. Full name	Date	Amount of each
Julep Restaurant	(Mo., Day, Year)	disbursement this period
Mailing Address 1305 Northside Drive	<u>3 /29 /10</u>	\$ 1,800.00
City, State, Zip Code	1 1	S
Jackson, MS 39211 Purpose of Disbursement (Optional)		
	Aggregate Year-to-date	1,800.00
F. Full name Winning Edge Communications	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	4 / 8 / 10	\$ 267.60
P.O. Box 269 City, State, Zip Code		
Alexandria, AL 36250	_/_/_	S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 267.60
	rear-to-date	207.00